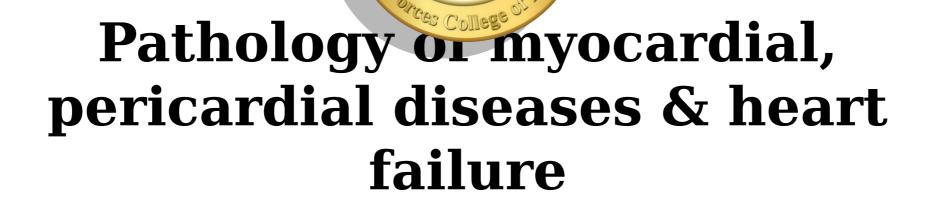


Armed Forces College Of medicine AFCM

HAPPY-WISHESINEU

For getting success There is only one lesson Keep your focus on goal And Go for it with Passion

Good Moming



Prof. Eman Abdelbary

Intended Learning Objectives (ILOs)



By the end of this lecture the student will be able to:

- 1. Summarize causes, types, pathological features and complications of myocardial & pericardial diseases
- 2. Correlate between etiology, types, pathological features, investigations and complications of myocardial & pericardial diseases
- 3. List cardiac tumors
- 4. Summarize causes & pathological features of heart failure
- 5. Correlate between etiology, types, pathological features, investigations and complications of heart failure

Lecture plan

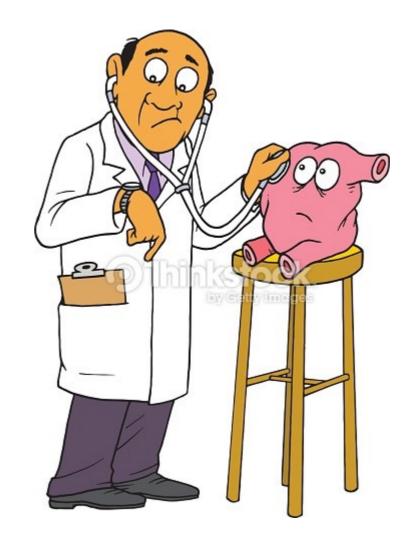


- 1. Part 1 (5 min): Cardiomyopathy
- 2. Part 2 (10 min): Myocarditis, cardiac tumors
- 3. Part 3 (15 min): Pericardial diseases
- 4. Part 4 (10 min): heart failure
- 5. Lecture Quiz (5 min)

Diseases of the myocardium



- Cardiomyopathy
- *Myocarditis



Cardiomyopathy



Definition: Myocardial disease associated with intrinsic cardiac dysfunction (mechanical / electric).

* They are characterized by marked dilatation, hypertrophy or stiffness impaired contractility arrhythmias & possibly heart failure.

It may

(Cardio-Pulmonar

Primary

(Idiopathic, most common)

Unknown cause

Seconda

ry

Related to known aetiological

New Five Years Program

Cardiomyopathy

1,	3
Arrange	
	The rote College S
	o C Piles

Restrictive	Hypertrophic	Dilated	Types:
Obliterative cardiomyopathy	Idiopathic hypertrophic subaortic stenosis	Congestive cardiomyopathy	Synony m
Rarest	Rare	Most common (90%)	Incidenc e
- Primary -Secondary to amyloidosis, hemochromatosi s,	- Primary - Autosomal dominant inheritance (50% of cases)	 Most commonly primary. Secondary to alcoholism, coronary artery diseases, viral myocarditis 	Etiology
Cardiac rigidity Decreased diastolic filling Low CO New Five Years Progra	Asymmetrical Lt. ventricular hypertrophy particularly septal	Markedly dilated heart, A thrombus may be seen in cardiac chambers	Patholo gy

Cardiomyopathy



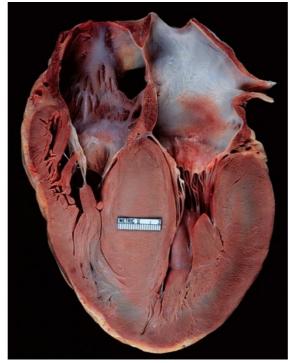
Dilated cardiomyopat hy



https://www.omicsgroup.org/articles-admin/disease-images/dilated-cardiomyopathy-57871.jpg

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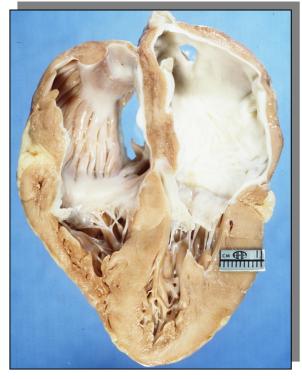
Hypertrophic cardiomyopat hy



https://thoracickey.com/wp-content/ uploads/2016/06/m_hurs13_c033f002.jpeg

(Cardio-Pulmonary Module)

Restrictive cardiomyopat hy



https://thoracickey.com/wp-content/uploads/2016/08/C162-FF1.gif

Cardiomyopathy (Quiz):



A 24-year-old male, a professional football player develops a severe chest pain during a game. Echocardiography reveals an asymmetrically thickened interventricular septum. Which of the following is the most likely diagnosis?

- A. Hypertrophic cardiomyopathy
- B. Constrictive pericarditis
- C. Dilated cardiomyopathy
- D. Restrictive cardiomyopathy
- E. Rheumatic myocarditis

Cardiomyopathy (Quiz):



A 24-year-old male, a professional football player develops a severe chest pain during a game. Echocardiography reveals an asymmetrically thickened interventricular septum. Which of the following is the most likely diagnosis?

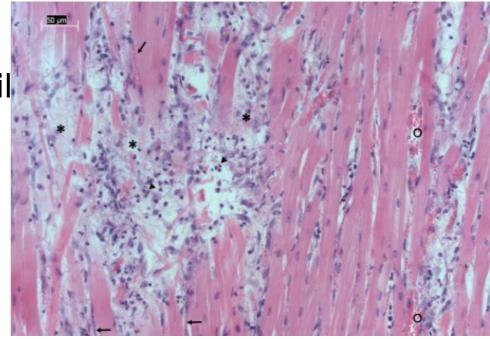
- A. Hypertrophic cardiomyopathy
- B. Constrictive pericarditis
- C. Dilated cardiomyopathy
- D. Restrictive cardiomyopathy
- E. Rheumatic myocarditis

Myocarditis



Definition: Inflammation of the myocardium.

- Usually acute
- May resolve or progress to heart fail



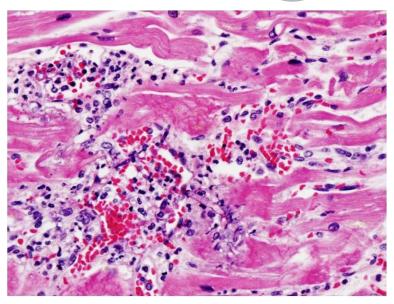
https://www.researchgate.net/profile/Tobias_Eisenberg/publication/262483884/figure/fig2/AS:296803716091905@1447774928278/Heart-left-ventricular-wall-showing-acute-suppurative-and-fibrinous-myocarditis-with.png

Myocarditis



Types:

- 1- Rheumatic myocarditis
- 2- Viral myocarditis (e.g. Coxsackie B)
- 3- Toxic myocarditis (Diphtheria)
- 4- Acute interstitial myocarditis
- 5- Suppurative myocarditis: (abscess) in septime a 2252.jpg
- 6- Chronic specific myocarditis: tuberculous, syphilitic, parasitic.
- **7- Radiation myocarditis**



Tumors of the heart



Benign

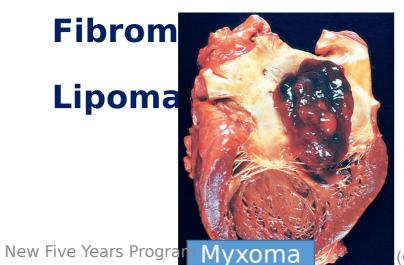
Myxoma (Most

common)

Rhabdomyoma

Fibrom

Lipoma



Malignan **Metastatic Primary** (rare) Rhabdomyosarco ma

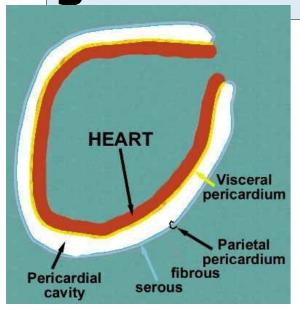
(Cardio-Pulmonary Module)

Angiosarcoma

Diseases of the pericardium



Pericarditi s



Hydopericardi um

Haemopericardi um





Suppurati ve



Tuberculo us Adherent mediastin opericarditi

> Constricti ve



	1. Serofibrinous	2. Suppurative	3. Tuberculous
Etiolog y	Rheumatic fever, Uraemia, Myocardial infarction, Viral, Bacterial	Pyogenic bacteria through: * Blood spread (septicemia) * Direct/ lymphatic spread (rib osteomyelitis, lung infection)	Spread from pulmonary TB
Patholo gy	The fibrin is precipitated on - inner surface of parietal layer - outer surface of visceral layer → The pericardium appears	Pus in the pericardial sac Sever toxemia	The pericardial sac is filled with caseous material



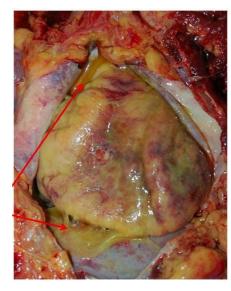
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Serofibrinous pericarditis



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inflammation-6120815190144phpapp02/95/
inflammation-6-20728.jpg?cb=1345057398

Suppurative pericarditis



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Tuberculous pericarditis



http:// www.pathologylearningce ntre.uct.ac.za/sites/ default/files/image_tool/ images/408/ II_vii_1_R_annotated.jpg



4. Adherent mediastinopericarditis

5. Constrictive pericarditis

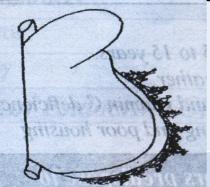
Etiology

Healing of serofibrinous, suppurative or tuberculous pericarditis

Pathology

- **9** Obliterated pericardial sac
- Adherence of parietal pericardium to surrounding structures
- Cardiac hypertrophy &

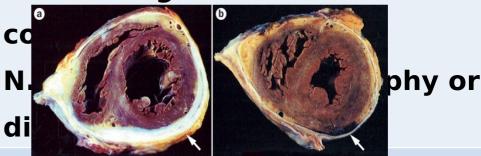
dilatation occur



https://encryptedtbn0.gstatic.com/images? q=tbn:ANd9GcSVugxN2M9theidcW GUYt_OitmIDmUjfWqW9nonnP9S-8uh27 y

Fibrosis ____ adherence of visceral to parietal pericardium obliterated pericardial sac:

- Reduced cardiac diastolic filling.
- Constriction of the venae cava orifices & generalized venous



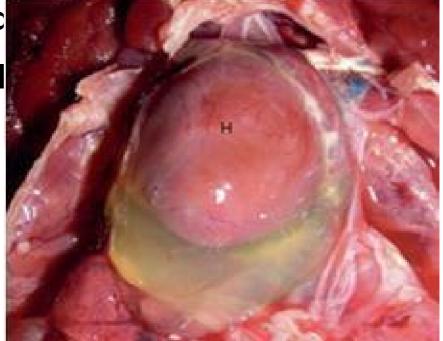
https://media.springernature.com/full/nature-static/assets/v1/image-assets/nrcardio.2014.100-f1.jpg

Hydropericardium



Definition: Accumulation of transudate in the pericardial sac

Etiology: As a part of generalized ec (Cardiac, renal, nutritional



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Haemopericardium



Definition: Accumulation of blood within the pericardial sac

Etiology:

- **≻**Trauma
- Rupture of myocardial infa
- Rupture of aneurysm
- **▶** Blood diseases e.g. leukemia





https://ars.els-cdn.com/content/image/3-s2.0-B9780702053191000128-f001v003-026-9780702053191.jpg

https://library.med.utah.edu/WebPath/jpeg5/CV155.jpg

Effects: Cardiac tamponade

Acute heart Tailure



Pericardial diseases (Quiz):



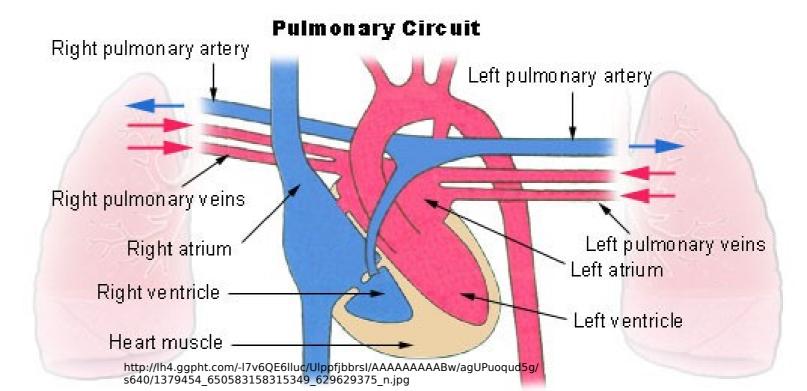
Write true or false:

- 1. Lobar pneumonia may be complicated by hydroper dium
- 2. Constrictive pericarditis is associated with cardiac False hypertrophy



Definitio Failure of the ventricular contractions to maintain sufficient cardiac output (C.O.) to meet the body

Types: Acute & Amosnic





Acute heart failure:

Aetiology:

- 1. Acute myocardial damage: recent infarction or myocarditis
- 3. Haempericardium heart compression diastone
- filling C.O. *fects:* Acute congestion & edema (Pulmonary &/or Generalized)



Chronic heart failure:

Pathogenesi§tages 2:

1- Stage of Compensation

(the heart maintain

Slight chamber dilatation slight stretch of myocardial fibers stronger contractions

Compensatory hypertrephy stronger contractions

Heart rate → tissue perfusion

2- Stage of Decompensation

Marked chamber dilatation overstretch of myocardial fibers weaker contractions

Hypertrophy + NO capillaries ischemia fibrosis weakening & dilatation

Heart rate → cardiac fatigue



Chronic heart failure: Types:

A- Left side heart failure:

Etiology:

1. Hypertension

Healed infarction

- 2. Coronary heart disease Arteriosclerotic heart disease
- 3. Valve disease: Aortic stenosis or incompetence, mitral

incompetence



Chronic heart failure: Types:

A- Left side heart failure:

Pathological features:

- 1. Hypertrophy & dilatation of Lt. atrium & ventricle.
- 2. Pulmonary edema: leading to dyspnea, orthopnea & paroxysmal nocturnal dyspnea
- 3. Chronic lung congestion pulmonary hypertension Rt. Side H.F.
- 4. Low cardiac output manifestations: e.g. oliguria



Chronic heart failure: Types:

B- Right side heart failure:

Etiology:

Mitral stenosis

- 1. Causes in left side of the heart failure
 - Pulmonary stenosis
- 2. Causes in right side of the heart

Tricuspid incomptence

- 3. Congenital heart diseases: ASD, VSD
- 4. Core pulmonale: (Right side heart failure caused by lung Lung fibrosis: e.g. T.B., bilharziasis disease) Emphysoma

New Five Years Program

due to

(Cardio-Pulmonary Module)



Chronic heart failure: Types:

B- Right side heart failure:

Pathological features:

- 1. Hypertrophy & dilatation of Rt. atrium & ventricle.
- 2. Chronic generalized congestion generalized edema, cyanosis,...etc
- 3. Low cardiac output manifestations.
 Combined Lt. & Rt. Side heart failure = Congestive
 heart failure

Heart failure (Quiz):



Which of the following lesions is a cause of Core pulmonale?

- A. Left ventricular failure
- B. Myocardial infarction
- C. Aortic stenosis
- D. Pulmonary emphysema
- E. Cardiac tamponade

Heart failure (Quiz):



Which of the following lesions is a cause of Core pulmonale?

- A. Left ventricular failure
- B. Myocardial infarction
- C. Aortic stenosis
- D. Pulmonary emphysema
- E. Cardiac tamponade

Key points:



- Cardiomyopathy is a cardiac disease due to myocardial dysfunction (mechanical / electric).
- Dilated cardiomyopathy is the most common type, while restrictive type is the rarest
- Healing of suppurative, tuberculous and serofibrinous pericarditis leads to adherent mediastino-pericarditis and constrictive pericarditis
- Heart failure may be acute or chronic

Core pulmonale is right side heart failure due to lung

Suggested Textbooks



1. Mitchell R. Blood vessels. In Robbins and Cotran pathologic basis of

disease, 10th edition. Kumar, Abbas & Aster (eds). Elsevier

Saunders. Pages 487 to 491.

2. Cardiac pathology. In USMLE step 1 lecture notes, 2017. Kaplan INC,

New York. Pages 112 -125



